

# Calvin University Official Checkout Form for Spring 2020

**1**

Name: \_\_\_\_\_

ID: \_\_\_\_\_

Hall/Building: \_\_\_\_\_ Room/Apartment number: \_\_\_\_\_

**2**

I have cleaned my room and bathroom yes no

I have returned furniture to its original position. yes no

I have turned in my key yes no

**3**

I agree that all the information above is accurate. Lost key charge is \$25. All rooms will be inspected later by a university official for damages and missing items, with appropriate charges added.

Signature: \_\_\_\_\_

Date: \_\_\_\_\_